

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

ADDRESS (number and street) ▼

7000 Cardinal Place

☐ Check if different than previously reported. (ACC)

Dublin

OH

43017

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00332833

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Cushman

Signature of Treasurer

Nancy Cushman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
06 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">191856.82</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">188395.53</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">21202.29</span>	<span style="border: 1px solid black; padding: 2px;">144741.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">209597.82</span>	<span style="border: 1px solid black; padding: 2px;">336597.82</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">45017.89</span>	<span style="border: 1px solid black; padding: 2px;">172017.89</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">164579.93</span>	<span style="border: 1px solid black; padding: 2px;">164579.93</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

18540.06

77332.64

(ii) Unitemized .....

2624.14

63688.34

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

21164.20

141020.98

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

21164.20

141020.98

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

3500.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

38.09

220.02

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

21202.29

144741.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

21202.29

144741.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	118500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	17.89	17.89
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	17.89	17.89
29. Other Disbursements .....	21000.00	53500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45017.89	172017.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45017.89	172017.89

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21164.20	141020.98
34. Total Contribution Refunds (from Line 28(d)) .....	17.89	17.89
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21146.31	141003.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARYANN CLYBURN**

Mailing Address 24262 CATALUNA CIR

City State Zip Code  
MISSION VIEJO CA 92691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

MGR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

158.68

Date of Receipt

06 / 30 / 2013

**Transaction ID : 7530332**

Amount of Each Receipt this Period

0.00

**[MEMO ITEM]**

Refund(s) on Schedule B Totaling \$17.89 This changes the YTD Total to \$158.68

Full Name (Last, First, Middle Initial)

**B. OLA M SNOW**

Mailing Address 267 DONERAIL AVE

City State Zip Code  
POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR BUS PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

**Transaction ID : PR10055346174**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. KELLI M KOVAK**

Mailing Address 195 N HARBOR DR #802

City State Zip Code  
CHICAGO IL 60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

06 / 30 / 2013

**Transaction ID : PR11742636174**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 104

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL R LEODLER**

Mailing Address 8696 NW ANDERSON HILL RD

City	State	Zip Code
SILVERDALE	WA	98383

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHYSICAL SECURI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR7800616174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT F F GLOVER**

Mailing Address 5633 N KOSTNER AVENUE

City	State	Zip Code
CHICAGO	IL	60646

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8737746174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. THOMAS E E HUNT**

Mailing Address 8093 WILDWOOD LANE

City	State	Zip Code
DARIEN	IL	60561

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8737756174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. TONY SZADO**

Mailing Address 5342 S LEWISTON CT

City State Zip Code  
 CENTENNIAL CO 80015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8737766174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARK R OVERMAN**

Mailing Address 900 WYNDHAM HILL CT

City State Zip Code  
 SOUTHLAKE TX 76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.51

Date of Receipt

06 / 30 / 2013

Transaction ID : PR873776174

Amount of Each Receipt this Period

38.54

P/R Deduction (\$19.27 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LINDA S LOCKYER**

Mailing Address 1133 NOE STREET

City State Zip Code  
 SAN FRANCISCO CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8737786174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.54



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. RONALD A A DEDELS**

Mailing Address 1080 BIG WATER POINT

City State Zip Code  
 GREENSBORO GA 30642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : PR8737806174**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. LOIS A BARRETT**

Mailing Address 2934 CENTRAL ST #3E

City State Zip Code  
 EVANSTON IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : PR8737816174**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. ANTHONY J J CAPRIO**

Mailing Address 6 COTTAGE LANE

City State Zip Code  
 MARLBORO NJ 07746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EVP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : PR8737936174**

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

336.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 10 OF 104  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KATHY S POPEJOY**

Mailing Address 11127 W 59TH AVE

City	State	Zip Code
ARVADA	CO	80004

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

Transaction ID : PR8737946174

Amount of Each Receipt this Period

51.12

P/R Deduction (\$25.56 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. FREDERICK D CK D NELSON**

Mailing Address 7303 DEACON COURT

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

Transaction ID : PR8737966174

Amount of Each Receipt this Period

82.84

P/R Deduction (\$41.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER J PHER J ANDERSON**

Mailing Address 3600 GEORGE PIERCE

City	State	Zip Code
SUWANEE	GA	30024

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

Transaction ID : PR8737996174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

171.96

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LISA A ASHBY**

Mailing Address 605 MUIRFIELD CT

City

AUGUSTA

State

GA

Zip Code

30907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, MED DEVICE & D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738006174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DOUGLAS J J KATZ**

Mailing Address 20 MCCUE RD

City

MORGANVILLE

State

NJ

Zip Code

07751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738026174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. HARRY T VAIL**

Mailing Address 2693 FOX RIVER LN

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

REGION VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738046174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES A WHIDDEN**

Mailing Address 10 CHERRY LANE

City  
CHESTER

State Zip Code  
NY 10918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738106174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT M M RANDKLEV**

Mailing Address 4708 MEANDERING WAY

City  
COLLEYVILLE

State Zip Code  
TX 76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, HSS OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738116174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GEOFFREY Y Y Y MCMAHON**

Mailing Address 57-531 KAMEHAMEHA HWY

City  
KAHUKU

State Zip Code  
HI 96731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738126174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BENJAMIN T N T THOMPSON**

Mailing Address 2029 LEWIS CROSSING COURT

City  
KELLER

State Zip Code  
TX 76248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
NVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

**Transaction ID : PR8738146174**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. LAUREL BEELER**

Mailing Address 1723 EAGLE TRL

City  
OXFORD

State Zip Code  
MI 48371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, SALES TRAINING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2013

**Transaction ID : PR8738206174**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID A GOLDSBERRY**

Mailing Address 321 ST ANDREWS LN

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

**Transaction ID : PR8738216174**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

202.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL L L SWANBERG**

Mailing Address 3648 TIERRA PARIS

City  
EL PASO

State Zip Code  
TX 79938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, ENGINEERING MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738226174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL L L GROESBECK**

Mailing Address 33916 N SUMMERFIELDS DR

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, QRA MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738236174

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DEBRA L SCHOTZ**

Mailing Address 2351 THORNWOOD AVENUE

City  
WILMETTE

State Zip Code  
IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, GM PERIOPERATIV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738276174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

218.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. GREGG A BREWSTER**

Mailing Address 3710 FENCELINE ROAD

City  
FRANKSVILLE

State Zip Code  
WI 53126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738286174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. FRANK E RIDGWAY**

Mailing Address 11513 TOTTENHAM PL

City  
RICHMOND

State Zip Code  
VA 23233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738326174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GREG W STORM**

Mailing Address 123 CHALLAIN DRIVE

City  
LITTLE ROCK

State Zip Code  
AR 72223-5517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.28

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738346174

Amount of Each Receipt this Period

45.64

P/R Deduction (\$15.98 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **STEPHEN A A INACKER**

Mailing Address 1490 S RIDGE ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, MEDICAL CHANNE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.44

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8738356174

Amount of Each Receipt this Period

75.76

P/R Deduction (\$37.88 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **WILFRIDO M O M SOSA**

Mailing Address 721 LIVE OAK

City

EL PASO

State

TX

Zip Code

79932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MANUFACTURING MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8738416174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **SUSAN J JACOBSON**Mailing Address 65 EAST MONROE  
#4606

City

CHICAGO

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8738456174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

189.76

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **ROBERT B B HOBGOOD**

Mailing Address 215 N. PINE STREET  
 UNIT 3903

City State Zip Code  
 CHARLOTTE NC 28202

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738466174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **EVELYN LONG**

Mailing Address 3333 HAWKS RIDGE DR

City State Zip Code  
 LAKELAND FL 33810

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738466174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **KATE C SPIRKO**

Mailing Address 6812 SPRUCE PINE DR

City State Zip Code  
 COLUMBUS OH 43235

FEC ID number of contributing  
 federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738516174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RACHEL R R STOLL**

Mailing Address 420 WAKEFIELD BLUFF COURT

City State Zip Code  
ALPHARETTA GA 30004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738536174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STACY SEPTER**

Mailing Address 18 MILLER DRIVE

City State Zip Code  
SYLACAUGA AL 35151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738566174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JAMES H HORNER**

Mailing Address 2706 ISLAND COVE ROAD

City State Zip Code  
FORT MILL SC 29708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, MANUFACTURING M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738596174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL S POGUE**

Mailing Address 1174 GREERS LANDING DR

City  
HERNANDO

State Zip Code  
MS 38632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738606174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BRENDA G G BARDEN**

Mailing Address 3435 ALTA VISTA DR

City  
CHATTANOOGA

State Zip Code  
TN 37411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738616174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DANNY W PENNY**

Mailing Address 27 N LAKE AVE

City  
THIRD LAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PACKAGING ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738646174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAY C GREER**

Mailing Address 1472 MILL RACE

City State Zip Code  
 ROCHESTER HILLS MI 48306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738656174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARK MISPLAY**

Mailing Address 1811 WINDY HILL LANE

City State Zip Code  
 PROSPER TX 75078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT (AM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738666174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CURTIS L L WILENS**

Mailing Address 1347 COVENTRY LN

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, MARKETING RESEA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738686174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. TAYLOR H H SMITH**

Mailing Address 1141 OLD COLONY RD

City  
LAKE FOREST

State Zip Code  
IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, GM ORTHOPEDIC S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738696174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. SCOTT A DONNELLY**

Mailing Address 12195 ANDREWS DRIVE

City  
PLAIN CITY

State Zip Code  
OH 43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738756174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT MOULTON**

Mailing Address 7017 VIOLET VEIL

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, FINANCE (GENERA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738766174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JOSEPH L L BOURQUE**

Mailing Address 18 BUSH HILL RD

City  
IPSWICH

State Zip Code  
MA 01938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738776174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEPHEN REARDON**

Mailing Address 9098 MEDITERRA PLACE

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738786174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. PAUL G FARLEY**

Mailing Address 52 ONONDEGA RD

City  
NARRAGANSETT

State Zip Code  
RI 02882

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738806174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. DANIEL BISHOP

Mailing Address 21614 CANYON FOREST CT

City State Zip Code  
 KATY TX 77450

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG &amp; ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738826174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PATRICK J J ECKHERT

Mailing Address 4685 SEVEN LAKES PL

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, STRATEGIC SOURC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738836174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RENE BLOCH

Mailing Address 401 SPRING DRIVE

City State Zip Code  
 YORKTOWN HEIGHTS NY 10598

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738846174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ANNLEA C C RUMFOLA**

Mailing Address 8314 DAVINGTON DR

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738856174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOHN A FIACCO**

Mailing Address 124 FOX HAVEN DRIVE

City

O'FALLON

State

MO

Zip Code

63368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS MGMT -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738866174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL D D SYNOR**

Mailing Address 31772 FAIRWAY DR N

City

FORISTELL

State

MO

Zip Code

63348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738866174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

190.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ERIC D SUTHERLAND**

Mailing Address 6433 TULIPWOOD LANE

City  
JAMESVILLE

State Zip Code  
NY 13078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738906174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ANDRE D SMITH**

Mailing Address 2514 BLUE WATER BAY DR

City  
KATY

State Zip Code  
TX 77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PHARM OPS & ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738936174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. TED L DIBIASE**

Mailing Address 4954 ROSEGATE COURT

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ORG HEALTH & LAB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.60

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8738946174

Amount of Each Receipt this Period

122.40

P/R Deduction (\$61.20 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

198.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JOSHUA T T GAINES**

Mailing Address 5721 CLOVER LANE

City State Zip Code  
 WESTERVILLE OH 43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, STRATEGY &amp; CORP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738966174

Amount of Each Receipt this Period

58.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEPHEN FLANNERY**

Mailing Address 275 EAST CENTER ST

City State Zip Code  
 SHAVERTOWN PA 18708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.11

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738966174

Amount of Each Receipt this Period

88.48

P/R Deduction (\$20.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHARLES AQUILINA**

Mailing Address 4871 NORMANDY DRIVE

City State Zip Code  
 GALENA OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MKTG &amp; PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8738966174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

184.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. GEORGE J J PLAVA**

Mailing Address 3526 PEMBROOKE DR

City

RICHMOND

State

TX

Zip Code

77406

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS &amp; ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

899.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739036174

Amount of Each Receipt this Period

138.46

P/R Deduction (\$69.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT S S SUMMERS**

Mailing Address 146 CHASELY CIRCLE

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG &amp; PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739056174

Amount of Each Receipt this Period

60.70

P/R Deduction (\$30.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. NATASHA C C NICOL**

Mailing Address 35 RED TAIL HAWK LOOP

City

PAWLEYS ISLAND

State

SC

Zip Code

29585

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, CLINICAL SPEC -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739066174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

237.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 104  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SEAN M MCCAFFREY**

Mailing Address 1020 BUCK RUN RD

City  
SOUTHPOINTEState Zip Code  
PA 15317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8739076174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DEBORAH E E WOLIN**

Mailing Address 44 LAKE MIST DRIVE

City  
SUGAR LANDState Zip Code  
TX 77479FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8739086174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STEVEN J J CALLISON**

Mailing Address 1368 LINCOLN ROAD

City  
COLUMBUSState Zip Code  
OH 43212FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8739096174

Amount of Each Receipt this Period

37.62

P/R Deduction (\$18.81 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

153.62

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. DEBORAH BROWN**

Mailing Address 3204 STONEBRIDGE TR

City State Zip Code  
 VALRICO FL 33596

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HEALTH SYSTEM P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739176174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. GARY G CACCIATORE**

Mailing Address 3810 LOCH GLEN CT

City State Zip Code  
 HOUSTON TX 77059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.25

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739196174

Amount of Each Receipt this Period

74.50

P/R Deduction (\$37.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. RICHARD F F COLLEY**

Mailing Address 2903 21ST AVE CT SE

City State Zip Code  
 PUYALLUP WA 98372-1712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739206174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. JAMES L SCOTT

Mailing Address 9318 PRATOLINA VILLA DRIVE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, NATIONAL MARKET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739226174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BRADLEY G G COCHRAN

Mailing Address 2589 AIKIN CIRCLE S

City State Zip Code  
 LEWIS CENTER OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739246174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM OWAD

Mailing Address 7558 HEATHERWOOD LN

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739256174

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

376.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA A STILLINGS**

Mailing Address 5833 WHITECRAIGS CT

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG & ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739296174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. JEFFREY B B BRANNON**

Mailing Address 3965 CLEARLAKE CIRCL

City State Zip Code  
ZANESVILLE OH 43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739306174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. CRAIG P COWMAN**

Mailing Address 6851 KILLILEA DRIVE

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PRODUCT MANAGEM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739316174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

188.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LORI S HAVLOVITZ**

Mailing Address 8969 SUNNINGDALE LANE

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, IT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739326174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. TRACY K GODFREY**

Mailing Address 1215 POLARIS PARKWAY  
# 175

City State Zip Code  
COLUMBUS OH 43240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, STRATEGIC PRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739336174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK D ZAWADZKI**

Mailing Address 5991 KITCHEN CT

City State Zip Code  
HILLIARD OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739346174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 33 OF 104  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial) <b>A. MARGARET M T M LAVALLE</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2013 <b>Transaction ID : PR8739356174</b>	
Mailing Address 9410 CULROSS CT		Amount of Each Receipt this Period 100.00	
City DUBLIN	State OH	Zip Code 43017	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Name of Employer CARDINAL HEALTH, INC	
Occupation SVP, HR SERVICES		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 650.00			
Full Name (Last, First, Middle Initial) <b>B. JOSEPH S S HODGE</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2013 <b>Transaction ID : PR8739366174</b>	
Mailing Address 2260 GNARLED PINE DRIVE		Amount of Each Receipt this Period 38.00	
City DUBLIN	State OH	Zip Code 43016	P/R Deduction (\$19.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Name of Employer CARDINAL HEALTH, INC	
Occupation EXEC, ACCOUNT		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 247.00			
Full Name (Last, First, Middle Initial) <b>C. MICHAEL C C KAUFMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2013 <b>Transaction ID : PR8739386174</b>	
Mailing Address 7160 TEMPERANCE POINT ST		Amount of Each Receipt this Period 384.60	
City WESTERVILLE	State OH	Zip Code 43082	P/R Deduction (\$192.30 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Name of Employer CARDINAL HEALTH, INC	
Occupation CEO, PHARMACEUTICAL		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2499.90			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		522.60	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. GREGORY BOGGS

Mailing Address 7746 POLO LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739396174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANGELA M M THOMAS

Mailing Address 9287 WINDY CREEK DR

City  
COLUMBUS

State Zip Code  
OH 43240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739406174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. AMY P SNOW

Mailing Address 5760 WHITECRAIGS CT

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739416174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

116.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **PETER A STOY**

Mailing Address 1955 ENCLAVE DRIVE

City State Zip Code  
MT PLEASANT SC 29464

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739426174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **LAURA L SMITH**

Mailing Address 5828 IVY BRANCH DR

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, SALES OPERATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739466174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **KEVIN M KANNALLY**

Mailing Address 14529 ROBINSON RD

City State Zip Code  
PLAIN CITY OH 43064

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739476174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DANA R THACKER**

Mailing Address 2934 GRIFFIN DR

City

LEWIS CENTER

State

OH

Zip Code

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739486174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES P COMBS**

Mailing Address 69259 LEE ROAD

City

ST CLAIRSVILLE

State

OH

Zip Code

43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739496174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL P P KENNEDY**

Mailing Address 4783 VISTA RIDGE DR

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, COMPLIANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1203.60

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739506174

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

276.60

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CYNTHIA S S RHOMBERG**

Mailing Address 9379 REDAN COURT

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739536174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CAROLYN E E GRANT**

Mailing Address 6869 MEADOW GLEN DR

City

WESTERVILLE

State

OH

Zip Code

43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR , GOVERNMENT REL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739546174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. KRISTINA J A J KALLMEYER**

Mailing Address 1110 LAKEMONT DRIVE

City

SPRINGBORO

State

OH

Zip Code

45066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739556174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

192.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. AARON L PITTS**

Mailing Address 5014 CLOSEBURN CT

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, SALES & MARKETI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739576174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. TROY L HANSON**

Mailing Address 5622 DORSEY DRIVE

City State Zip Code  
COLUMBUS OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.84

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739586174

Amount of Each Receipt this Period

91.36

P/R Deduction (\$45.68 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. PATRICK A A SELLS**

Mailing Address 3460 HYATTS RD

City State Zip Code  
POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739616174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

229.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CASSANDRA E RA E BAKER**

Mailing Address 1751 BARRINGTON RD

City State Zip Code  
 UPPER ARLINGTON OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, GOVT RELATIONS M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739646174

Amount of Each Receipt this Period

131.68

P/R Deduction (\$65.84 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES M BARKER**

Mailing Address 2761 SKELTON LN

City State Zip Code  
 BLACKLICK OH 43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, MANUFACTURING MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.29

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739666174

Amount of Each Receipt this Period

68.66

P/R Deduction (\$34.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STEPHEN T T FALK**

Mailing Address 2175 LANE RD

City State Zip Code  
 COLUMBUS OH 43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EVP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739686174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. CAROLE S S WATKINS

Mailing Address 1967 WOODLANDS PLACE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 CHIEF HUMAN RESOURCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739726174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JON GIACOMIN

Mailing Address 6792 INGALLS CT

City State Zip Code  
 GALENA OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EVP, OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739746174

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DALE A HILL

Mailing Address 5931 HERITAGE FARMS DR

City State Zip Code  
 HILLIARD OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, PHARM STRAT SOU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739756174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

572.60

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. ANNE F MCCLUSKEY

Mailing Address 10910 E SAN TAN BLVD

City State Zip Code  
 SUN LAKES AZ 85248

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, CLINICAL OPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739766174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT GIACALONE

Mailing Address 7471 BALFOURE CIRCLE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, REG AFFAIRS/CHF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739786174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PAMELA S S HOLOHAN

Mailing Address 405 E WASHINGTON ST

City State Zip Code  
 GARDNER IL 60424

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739796174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DEBRA A FLUNO**

Mailing Address 622 SUNNYSIDE AVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PHARM OPS & ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739806174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL D D BROWN**

Mailing Address 3103 SADDLE RIDGE

City  
RICHMOND

State Zip Code  
TX 77406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739826174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JACQUELINE A INE A GLEASON**

Mailing Address N 7896 VALLEY VIEW RD

City  
NEW GLARUS

State Zip Code  
WI 53574

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739876174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. ANTHONY D D WOO

Mailing Address 6151 HADDO WAY

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CORP DEVEL, FIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739886174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. TERESA M M JANZ

Mailing Address 2431 N. 84TH STREET

City State Zip Code  
WAUWATOSA WI 53226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739896174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KATHRYN J J ABLEIDINGER

Mailing Address 34 ASHBURY CT

City State Zip Code  
HUDSON WI 54016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739906174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

154.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL R R ROBINSON**

Mailing Address 8124 CROOKED OAKS CT

City  
GAINESVILLE

State Zip Code  
VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739916174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEVE M LAWRENCE**

Mailing Address 4868 CARRIGAN RIDGE

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, RETAIL INDEPEND

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739926174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GORDON A A CRAWFORD**

Mailing Address 8735 RICHARDS RD.

City  
UTICA

State Zip Code  
OH 43080

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, IT PROG/PROJ MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8739936174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

314.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID LAWRENCE**

Mailing Address 326 VINWOOD LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739946174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARK E ROSENBAUM**

Mailing Address 815 HAMMOCK LANE

City  
KNOXVILLE

State Zip Code  
TN 37934

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHIEF CUSTOMER OFFIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739956174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STUART MARTIN**

Mailing Address 9711 CONCORD RIDGE

City  
BRENTWOOD

State Zip Code  
TN 37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8739976174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

522.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LAWRENCE E MALHAM**

Mailing Address 206 LONE OAK DRIVE

City State Zip Code  
 WHITE HOUSE TN 37188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8739986174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DAVID E GAJESKI**

Mailing Address 21406 SAUNTON DR

City State Zip Code  
 KATY TX 77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8740036174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. KENDELL F F SHERRER**

Mailing Address 500 SOUTH PARKVIEW AVENUE  
 SUITE 305

City State Zip Code  
 BEXLEY OH 43209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, BENEFITS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8740086174

Amount of Each Receipt this Period

40.22

P/R Deduction (\$20.11 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. GARY B ELLIS**

Mailing Address 6146 BALMORAL DRIVE

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, HSS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740096174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ERIC M NORMAN**

Mailing Address 7170 KINGSCOTE CT.

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740106174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. THERESA L L GOULD**

Mailing Address 3418 BIG HICKORY DR.

City State Zip Code  
KINGWOOD TX 77345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740136174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

128.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. TINA M STAVINOHA**

Mailing Address 125 ARROW ROAD

City  
EAGLE LAKE

State Zip Code  
TX 77434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, LEARNING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740146174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CONNIE WOODBURN**

Mailing Address 9761 ERIN WOODS DR

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, PROF & GOVT REL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1755.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740156174

Amount of Each Receipt this Period

270.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBBIE D D JORGENSEN**

Mailing Address 578 MORTS DRIVE

City  
WENTZVILLE

State Zip Code  
MO 63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740166174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

384.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 104

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. BRIAN WORTH

Mailing Address 5654 ROTHESAY DRIVE

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740196174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID S OLSON

Mailing Address 12211 CLEARFORK DR

City	State	Zip Code
HOUSTON	TX	77077

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARM OPS &amp; ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740236174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ERIC C CHRISTENSEN

Mailing Address 2481 SUTTER PARKWAY

City	State	Zip Code
DUBLIN	OH	43016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740246174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RAYMOND GROTZINGER**

Mailing Address 0836 SW CURRY ST # 102

City  
PORTLAND

State Zip Code  
OR 97239

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, MULTI-FUNCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740276174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT G G MURPHY**

Mailing Address 2818 FRANCIS LANE

City  
COSTA MESA

State Zip Code  
CA 92626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740286174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID M ELLIS**

Mailing Address 6521 GOYA WAY

City  
EL DORADO HILLS

State Zip Code  
CA 95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740296174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **BLAIR R WILLIAMS**

Mailing Address 663 LYNNFIELD DR

City

WESTERVILLE

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740316174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **ANDREW R R KELLER**

Mailing Address PO BOX 3732

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740336174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **ERIC M JOHNSON**

Mailing Address 8078 TRAIL LAKE DR

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, FINANCE (GENERAL)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740406174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JILL F LANQUETTE**

Mailing Address 19 OLD FARM ROAD

City State Zip Code  
GRANVILLE OH 43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, COMMUNICATION MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740416174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DONNA B MANN**

Mailing Address 6666 MCVEY BLVD

City State Zip Code  
WEST WORTHINGTON OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ANALYTICS AND I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.02

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740426174

Amount of Each Receipt this Period

55.08

P/R Deduction (\$27.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. KEVIN HARRY**

Mailing Address 3003 BREEZEWOOD LN

City State Zip Code  
GALENA OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740456174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

131.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LAUREN E E FIELDS**

Mailing Address 4316 OAK WOOD COURT

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740466174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARC D DELORENZO**

Mailing Address 231 TILLER DRIVE

City State Zip Code  
POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740496174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. WILLIAM B B CHRISTIAN**

Mailing Address 3325 LITTLEPORT LANE

City State Zip Code  
ACWORTH GA 30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740536174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. ERIC T BOLLING**

Mailing Address 13162 THORNTON DRIVE

City State Zip Code  
 FRISCO TX 75035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740546174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. MARY W BAXTER**

Mailing Address 3913 REGAL COURT

City State Zip Code  
 VIRGINIA BEACH VA 23452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740556174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. KIMBERLY A Y A ROBINETTE**

Mailing Address 9409 AVEMORE CT.

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, FINANCE (SS) MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740576174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 55 OF 104

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL T BUSTER**

Mailing Address 66 W BEECHWOLD BLVD

City	State	Zip Code
COLUMBUS	OH	43214

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SOFTWARE ENGINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740596174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CAMERON J J BRADY**Mailing Address 529 N. MILWAUKEE AVE.  
UNIT 2N

City	State	Zip Code
CHICAGO	IL	60642

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, BUS INTEGRATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740626174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SCOTT WOLFF**

Mailing Address 3446 N CLAREMONT AVE

City	State	Zip Code
CHICAGO	IL	60618

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740656174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN K SINGLETON**

Mailing Address 2521 EAST 31ST STREET

City

TULSA

State

OK

Zip Code

74105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740666174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOHN S LINDSEY**

Mailing Address 50 TIMBERKNOLL LOOP

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, ENTERPRISE INFR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740676174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CRAIG C BARANSKI**

Mailing Address 12 MASSINA DR

City

WHEELING

State

WV

Zip Code

26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740686174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES E BACH**

Mailing Address 26061 TWIN POND RD

City State Zip Code  
LAKE BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740696174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BRIAN R BUSS**

Mailing Address 7483 BARDSTON DRIVE

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SOFTWARE ENGINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740706174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT M M GABEL**

Mailing Address 1605 BERLIN STATION RD

City State Zip Code  
DELAWARE OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, RISK MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740716174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 104  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. HARRY BEDGOOD**

Mailing Address 105 LEE SMITH LANE

City State Zip Code  
 KERNERSVILLE NC 27284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OP EXCELLENCE D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740746174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JEFFREY W W HENDERSON**

Mailing Address 347 MORGAN LN

City State Zip Code  
 GAHANNA OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

CHIEF FINANCIAL OFFI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740756174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JOHN J BYRNES**

Mailing Address 161 TUCKER DR

City State Zip Code  
 WORTHINGTON OH 43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TAX TECHNICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740766174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. ANDREW GRANT

Mailing Address 9440 NICHOLSON WAY

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740776174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KENNETH H H ROBINETTE

Mailing Address 9409 AVE MORE CT.

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONAL EXCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740786174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JASON D MAXWELL

Mailing Address 211 DOVER ROAD

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, LIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8740796174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DONALD S S LUCHINI**

Mailing Address 212 LAKESIDE DRIVE

City State Zip Code  
 MCKEES ROCKS PA 15136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, FINANCE (GENERA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740826174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DENNIS W W BRAUN**

Mailing Address 5667 MEDALLION DR WEST

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, FINANCE MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740836174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JEFFREY E E GREER**

Mailing Address 1570 CAMBRIDGE BLVD

City State Zip Code  
 MARBLE CLIFF OH 43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ENTERPRISE ARCHI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740866174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. AMELIA D D MCCARTY**

Mailing Address 5864 LAKEVIEW DR

City  
HILLIARD

State Zip Code  
OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
ASST GEN CSL, REGULA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740876174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BENNY SLEDGE**

Mailing Address 8016 W 138TH TERRACE

City  
OVERLAND PARK

State Zip Code  
KS 66223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP,BUSINESS ACQUISIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740896174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JAMES W HILLMAN**

Mailing Address 141 WOODSTREAM DR

City  
GRAND ISLAND

State Zip Code  
NY 14072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740906174

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. COLLEEN GREINER**

Mailing Address 424 VINTAGE CIRCLE

City State Zip Code  
 MYRTLE BEACH SC 29579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740916174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GREGORY J J HALVACS**

Mailing Address 7402 OVERLAND TRAIL

City State Zip Code  
 DELAWARE OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, CORPORATE SECUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740946174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL A A MONE**

Mailing Address 4909 SCENIC CREEK DR

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ASC GEN CSL, REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8740956174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A A DUFFY**

Mailing Address 6825 MACNEIL DR

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, MED CONSUMABLE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740966174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STANLEY L L NAGEL**

Mailing Address 5771 OLDENBURGH WAY

City	State	Zip Code
DUBLIN	OH	43016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8740976174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARTHA HUSTON**

Mailing Address 490 E. SUNBURST LN

City	State	Zip Code
TEMPE	AZ	85284

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HSS CUSTOMER SU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741016174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

178.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA MARLING-GEORGE**

Mailing Address 9334 PRATOLINO VILLA DR.

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TALENT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741026174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. DONALD C C GREENWOOD**

Mailing Address 14402 MARINA SAN PABLO PLACE  
# 1002

City State Zip Code  
JACKSONVILLE FL 32224-0828

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP,BUSINESS ACQUISIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741036174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. ANDREW T T ALDERMAN**

Mailing Address 1225 LEICESTER PL.

City State Zip Code  
COLUMBUS OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, STRATEGY & BUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741056174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

164.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SHELLEY A A BIRD**

Mailing Address 7998 CARAWAY AVE

City	State	Zip Code
DUBLIN	OH	43016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741066174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT S S THOMPSON**

Mailing Address 8338 AMBERLEIGH WAY

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741076174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANDREW W W WEHR**

Mailing Address 905 LITTLE BEAR LOOP

City	State	Zip Code
LEWIS CENTER	OH	43035

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIRECTOR, EH&amp;S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741086174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

288.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RONALD BROWN**

Mailing Address 7417 NEWALBANYLINKDR

City State Zip Code  
NEW ALBANY OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741096174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ISMAEL VILLARREAL**

Mailing Address 7302 EMERALD GLEN DR

City State Zip Code  
SUGAR LAND TX 77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741106174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID R DION**

Mailing Address 182 N FLORA PARKWAY

City State Zip Code  
ADDISON IL 60101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, QUALITY ASSURAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741116174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. MAUREEN GIRARD**

Mailing Address 130 N GARLAND

City  
CHICAGO

State Zip Code  
IL 60602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, MKTG & PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741146174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. ELIZABETH M TH M KRENZER**

Mailing Address 343 MILFORD DR

City  
DEERFIELD

State Zip Code  
IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, MANUFACTURING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741156174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. JESSICA L L MAYER**

Mailing Address 4852 CARRIGAN RIDGE

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741176174

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

136.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. STUART G G LAWS**

Mailing Address 5635 CYPRESS COURT

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CHIEF ACCOUNTIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741206174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. ANNEMARIE IE LA BUE**

Mailing Address 1877 TEWKSBURY RD

City State Zip Code  
 UPPER ARLINGTON OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, LAB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741246174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. SANJEETH H PAI**

Mailing Address 367 CEDAR TRACE

City State Zip Code  
 XENIA OH 45385-9392

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM STRAT SOUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741356174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 104

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CHRISTINE L NE L BENTLEY**

Mailing Address 12283 SOUTH PARKER STREET

City State Zip Code  
 OLATHE KS 66061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MANGNG CNSLT, S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741366174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KEVIN L MARTIN**

Mailing Address 804 CATALINA COURT

City State Zip Code  
 MACON MO 63552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MANUFACTURING M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741386174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JOSEPH A A GOTTRON**

Mailing Address 874 AYLESBURY DRIVE

City State Zip Code  
 GAHANNA OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PHARMACEUTICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741396174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. JEFFREY A A CRIST

Mailing Address 14177 PERFECT RD.

City State Zip Code  
 SUNBURY OH 43074

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, IT CLIENT SYS M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741426174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN C RADEMACHER

Mailing Address 5006 ROSALIND LANE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRESIDENT, AMBULATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741486174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DIANNE RADIGAN

Mailing Address 900 EASTCHESTER DR

City State Zip Code  
 GAHANNA OH 43230

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, COMMUNITY RELATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741516174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

314.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. SALLY CURLEY**

Mailing Address 9035 ESIN COURT

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, INVESTOR RELATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741526174

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. GEORGE S S BARRETT**

Mailing Address 246 E. SYCAMORE ST.

City State Zip Code  
 COLUMBUS OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 CHAIRMAN/CEO, CARDIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741536174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. MARK PILKINGTON**

Mailing Address 4367 HICKORY ROCK DR

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741586174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

610.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. CRAIG MORFORD**

Mailing Address 5565 LAKE SHORE AVE,

City  
WESTERVILLE

State Zip Code  
OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHIEF COMPLIANCE/LEG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741596174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. TOHID A VAHEDIAN**

Mailing Address 1857 COLLINGSWOOD RD

City  
COLUMBUS

State Zip Code  
OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, GM MED SVCS & S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741636174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. MICHAEL J J MANGIONE**

Mailing Address 10733 JONES ROAD

City  
CLARENCE

State Zip Code  
NY 14031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741646174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

472.60



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ERIC J PERLA**

Mailing Address 15426 COURT AMBER TL

City  
CYPRESS

State Zip Code  
TX 77433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741656174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOEL M BARCZAK**

Mailing Address 1570 COUNTRY WALK DR

City  
FLEMING ISLAND

State Zip Code  
FL 32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741676174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SEAN P WATERS**

Mailing Address 2621 EAST ARABIAN DRIVE

City  
GILBERT

State Zip Code  
AZ 85296

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, CHEM/PHARMA OPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741716174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. HENRY M CHILTON**

Mailing Address 32 PALISADES PARKWAY

City State Zip Code  
OAK RIDGE TN 37830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741726174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. WILLIAM S S CLAUNCH**

Mailing Address 10744 CAMPDEN LAKES BLVD

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, OPERATIONS SERVI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741736174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LUKE C AUGUSTINE**

Mailing Address 10834 S 166TH ST

City State Zip Code  
OMAHA NE 68136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741746174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

252.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 104

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KATHERINE A NE A BENSON**

Mailing Address 3410 NOBB HILL DR

City

HUDSONVILLE

State

MI

Zip Code

49426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741756174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DANIEL F F MURPHY**

Mailing Address 30 WILLOWBROOK RD

City

WEST HARTFORD

State

CT

Zip Code

06107-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741766174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. BENSON P P YANG**

Mailing Address 137 LAKESIDE DRIVE

City

CORTE MADERA

State

CA

Zip Code

94925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MULTI-FUNCTION M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741776174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$76.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 104

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. CARROLL B B CALLICOTT

Mailing Address 3139 SUMMERLIN DRIVE

City

BELDEN

State

MS

Zip Code

38826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

MGR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741786174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOSEPH E E LUKACS

Mailing Address 18 VILLAGE GROVE RD

City

LITTLE ROCK

State

AR

Zip Code

72211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741816174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES FRIES

Mailing Address 138 NEW CUT ROAD

City

WINDER

State

GA

Zip Code

30680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, DIRECT SALES MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR8741846174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARC B MULLEN**

Mailing Address 1650 SHERBORNE LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741856174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. IHSIEN S S LIN**

Mailing Address 7664 MILL SPRINGS DRIVE

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, STRATEGIC PRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741866174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. WAYNE J BOUDREAUX**

Mailing Address 405 PETREL TRAIL

City  
BRADENTON

State Zip Code  
FL 34212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8741886174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 104  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CRAIG ROTHMAN**

Mailing Address 42 SEMINOLE WAY

City State Zip Code  
 SHORT HILLS NJ 07078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741896174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. THOMAS J J RAFFERTY**

Mailing Address 38 HERITAGE COURT

City State Zip Code  
 DELMONT PA 15626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, STRATEGIC SOURCI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741906174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL A A MARUSA**

Mailing Address 38 ALPINE CIRCLE

City State Zip Code  
 SANDY HOOK CT 06482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8741916174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ANITA ANDERSON**

Mailing Address 27341 DAKOTA AVE.

City State Zip Code  
 ELKO MN 55020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741946174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CATHY CHENETSKI**

Mailing Address 5734 ENNISHANNON PLACE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741966174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. AKEEM C IMANJONES**

Mailing Address 4955 FANCY-FREE LANE

City State Zip Code  
 COLUMBUS OH 43231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 30 2013

Transaction ID : PR8741976174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ALFREDO S S RUSSO**

Mailing Address 2490 ALUM CROSSING DRIVE

City State Zip Code  
 LEWIS CENTER OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, REGULATORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742016174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DAVID K ORENSTEN**

Mailing Address 3641 DAYSPRING DRIVE

City State Zip Code  
 HILLIARD OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

ASST GEN CSL, LITIGA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742026174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. RICHARD W W WATSON**

Mailing Address PO BOX 991

City State Zip Code  
 SUMNER WA 98390

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742036174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ROGELIO A A ARMINO**

Mailing Address 6213 BLUFF TRAIL LN

City  
EL PASO

State Zip Code  
TX 79912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8742046174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ELEANOR M M DAUFENBACH**

Mailing Address 2029 W. LANE AVENUE

City  
COLUMBUS

State Zip Code  
OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, CLINICAL OPS MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8742056174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. PATRICIA A MORRISON**

Mailing Address 55 EAST ERIE  
#3801

City  
CHICAGO

State Zip Code  
IL 60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EVP, CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : PR8742066174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARK BLAKE**

Mailing Address 129 NORWOOD AVE

City  
MONTCLAIR

State Zip Code  
NJ 07043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EVP, STRATEGY & CORP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742096174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. URSULA L L MCNEILL**

Mailing Address 376 ROBERTS RUN COVE

City  
SUWANEE

State Zip Code  
GA 30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742106174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GILBERTO O QUINTERO**

Mailing Address 6650 BRODIE BLVD

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, QRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742126174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

498.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 104

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. COLIN HATCH

Mailing Address 1351 NOE BIXBY ROAD

City State Zip Code  
 COLUMBUS OH 43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, TAX TECHNICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8742156174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LANE CHERAMIE

Mailing Address 152 WEST 117TH STREET

City State Zip Code  
 CUT OFF LA 70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, HEALTH SYSTEM P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8742166174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DOUGLAS HELMREICH

Mailing Address 6600 DEESIDE DR.

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, MARKETING RESEA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR8742176174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY SCOTT**

Mailing Address 300 W. SPRING STREET  
#1502

City State Zip Code  
COLUMBUS OH 43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM P4 HEALTHCAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.90

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : PR8742196174**

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT WELLS**

Mailing Address 301 BRIDLE PATH LANE

City State Zip Code  
ANNAPOLIS MD 21403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : PR8742206174**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK S JONES**

Mailing Address 1106 PORTSMOUTH CIRCLE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : PR8742216174**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

314.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT J J DOONE**

Mailing Address 6119 PEPPERGRASS COURT

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742226174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JEFFREY P P LEDBETTER**

Mailing Address 6700 RIDPATH ROAD

City State Zip Code  
 GROVE CITY OH 43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

MGR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742236174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHELLE M E M RETHMAN**

Mailing Address 6417 BROMFIELD TRACE

City State Zip Code  
 CENTREVILLE VA 20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, TERRITORY SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742246174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. CATHERINE S NE S KENWORTHY**

Mailing Address 5000 SLATE RUN WOODS COURT

City State Zip Code  
 COLUMBUS OH 43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742256174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. KAUSHIK GHOSH**

Mailing Address 7691 FINBARR COURT

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742276174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. MEGHAN FITZGERALD**

Mailing Address 6 MORGAN

City State Zip Code  
 NORWALK CT 06851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, SPECIALTY SOLU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742286174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

338.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARSHA L L ARAGON**

Mailing Address 29306 DAKOTA DR

City  
VALENCIA

State Zip Code  
CA 91354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742296174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DANIEL MOVENS**

Mailing Address 987 RETREAT LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP/GM, PARMED PHARM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742316174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STEPHEN J J MEDVE**

Mailing Address 271 E WHITTIER ST.

City  
COLUMBUS

State Zip Code  
OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TALENT ACQUISIT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742336174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

176.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD MONTGOMERY**

Mailing Address 2717 QUEEN ELAINE DRIVE

City State Zip Code  
 LEWISVILLE TX 75056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TECHNICAL SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742376174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GAUTAM S S SHIRHATTIKAR**

Mailing Address 5473A BRIARDALE LANE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742386174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. RAMON GREGORY**

Mailing Address 9003 MEDITERRA PLACE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CUSTOMER SERVIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742396174

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

126.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. NICHOLAS S AUGUSTINOS**

Mailing Address 2416 15TH STREET

City State Zip Code  
 SAN FRANCISCO CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HEALTH INFO & S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR8742416174

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT A A HONNER**

Mailing Address 7167 SPRINGVIEW LN

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG & ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9340916174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CATHY MOCK**

Mailing Address 5440 YORK LANE NORTH

City State Zip Code  
 COLUMBUS OH 43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SUPPLIER DIVERS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9340926174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

276.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SHAUN F YOUNG**

Mailing Address 8145 SUMMERHOUSE DRIVE WEST

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MKTG & PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9340946174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KELLY B WILSON**

Mailing Address 4556 SATTERTON CIRCLE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9368926174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHARLES SLOAN**

Mailing Address 1904 SPRINGCROFT DRIVE

City State Zip Code  
FRANKLIN TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, CUST SVC TECHNI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9368956174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

214.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM C C BODINGER**

Mailing Address 24 BONWIT ROAD

City

RYE BROOK

State

NY

Zip Code

10573

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM KINRAY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR9368966174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHELLE E GILE**

Mailing Address 1 HANSON PLACE APT 12L

City

BROOKLYN

State

NY

Zip Code

11243

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

494.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR9368976174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JYOTHIRMAYI MAYI CHERRY**

Mailing Address 5136 ABBOTSBURY COURT

City

NEW ALBANY

State

OH

Zip Code

43054

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG &amp; ANAL

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

247.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : PR9393886174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

214.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DEBBIE J J MITCHELL**

Mailing Address 9 ALBAN MEWS

City State Zip Code  
 NEW ALBANY OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PUBLIC RELATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9408996174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. EUSEBIO ZAMORA**

Mailing Address 9450 TARTAN RIDGE BLVD

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARMACY SUPPOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9409006174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT KULIS**

Mailing Address 14 ROSY FINCH PLACE

City State Zip Code  
 THE WOODLANDS TX 77389

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM PHARMACY SOL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9409026174

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

238.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DONALD M CASEY**

Mailing Address 7708 TILLINGHAST DRIVE

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

CEO, MEDICAL SEGMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR9413436174

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BRIAN K MERRILL**

Mailing Address 6376 COUNTRYWOOD PL

City	State	Zip Code
RANCHO CUCAMONGA	CA	91739

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR9445156174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JOSEPH MASON**

Mailing Address 1 ELLIOT LANE

City	State	Zip Code
COTO DE CAZA	CA	92679

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR9945256174

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

449.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SHAUNA M LATSHAW**

Mailing Address 6069 TOURNAMENT DRIVE

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9950516174

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ALAN L DEUTSCHENDORF**

Mailing Address 8243 WORLEY DR.

City State Zip Code  
 LEWIS CENTER OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONAL EXCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9950526174

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SEAN C RAYNAK**

Mailing Address 200 MALLARD DRIVE

City State Zip Code  
 MONROEVILLE PA 15146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARM OPS MGMNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 30 / 2013

Transaction ID : PR9956316174

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. GE CAO**

Mailing Address 6 ALY SHEBA LANE

City  
STAFFORD

State Zip Code  
VA 22556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, INFO SERVICES &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

**Transaction ID : PR9997756174**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

18540.06

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Comerica Bank**

Mailing Address P.O. Box 75000  
MC 2250

City State Zip Code  
Detroit MI 48275-2250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2013

Transaction ID : 7444610

Amount of Each Receipt this Period

38.09

May Interest

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

38.09

38.09



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 104

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Sherrod Brown**Mailing Address PO Box 76187  
Suite 800

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Sen. Sherrod Brown**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

**Transaction ID : 7454595**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. The Hawkeye PAC**

Mailing Address PO Box 192

City Des Moines State IA Zip Code 50301

Purpose of Disbursement  
Direct Contribution

Candidate Name

**The Hawkeye PAC**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2013

**Transaction ID : 7461622**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Boehner for Speaker**

Mailing Address 100 E. Broad St. Ste 2330

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Joint Fundraiser

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2013

**Transaction ID : 7465007**

Amount of Each Disbursement this Period

10000.00
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Joint Fundraiser

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Tiberi for Congress**

Mailing Address 217 3rd Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Direct Contribution

011

Category/  
Type

Candidate Name

**Rep. Patrick J. Tiberi**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2013

**Transaction ID : 7483790**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Renacci For Congress**

Mailing Address 217 Third Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Stop Pymt - Renacci For Congress

011

Category/  
Type

Candidate Name

**Rep. James Renacci**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 7487692**

Amount of Each Disbursement this Period

-2000.00
----------

Stop Pymt - Renacci For Congress

Full Name (Last, First, Middle Initial)

**C. Renacci For Congress**

Mailing Address 217 Third Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Direct Contribution

011

Category/  
Type

Candidate Name

**Rep. James Renacci**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2013

**Transaction ID : 7487723**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Tim Scott For US Senate**

Mailing Address 1405 Ashley River Road

City	State	Zip Code
Charleston	SC	29407

Purpose of Disbursement

Candidate Name

**Sen. Tim Scott**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: SC District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : 7493993**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Andrews for Congress**

Mailing Address PO Box 295

City	State	Zip Code
Oaklyn	NJ	08107

Purpose of Disbursement
Direct Contribution

Candidate Name

**Rep. Robert E. Andrews**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 01

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : 7494441**

Amount of Each Disbursement this Period

1000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00
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24000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 104

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Sears**

Mailing Address 6711 Monroe St Bldg 3 Ste D

City	State	Zip Code
Sylvania	OH	43560

Purpose of Disbursement  
Barbara Sears, STATE HOUSE 46th OH

Candidate Name

**OH Rep. Barbara Sears**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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State: OH District: 46

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463972**

Amount of Each Disbursement this Period

1000.00
---------

Barbara Sears, STATE HOUSE 46th OH

Full Name (Last, First, Middle Initial)

**B. Citizens for Stephanie Kunze**

Mailing Address 865 Macon Alley

City	State	Zip Code
Columbus	OH	43206

Purpose of Disbursement  
Stephanie Kunze, STATE HOUSE 24th OH

Candidate Name

**Stephanie Kunze**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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State: OH District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463973**

Amount of Each Disbursement this Period

1000.00
---------

Stephanie Kunze, STATE HOUSE 24th OH

Full Name (Last, First, Middle Initial)

**C. Missourians for Koster**

Mailing Address PO Box 1551

City	State	Zip Code
Jefferson City	MO	65102

Purpose of Disbursement  
Chris Koster, ATTORNEY GENERAL MO

Candidate Name

**Chris Koster**

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463974**

Amount of Each Disbursement this Period

500.00
--------

Chris Koster, ATTORNEY GENERAL MO

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Matt Huffman for State Representative**

Mailing Address 2320 Merit Avenue

City Lima	State OH	Zip Code 45805
--------------	-------------	-------------------

Purpose of Disbursement  
Matt Huffman, STATE HOUSE 4th OH

Candidate Name

**OH Rep. Matt Huffman**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463976**

Amount of Each Disbursement this Period

1000.00
---------

Matt Huffman, STATE HOUSE 4th OH

Full Name (Last, First, Middle Initial)

**B. Citizens for Anne Gonzales**

Mailing Address 865 Macon Alley

City Columbus	State OH	Zip Code 43206
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Purpose of Disbursement  
Anne Gonzales, STATE HOUSE 19th OH

Candidate Name

**Anne Gonzales**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463978**

Amount of Each Disbursement this Period

1500.00
---------

Anne Gonzales, STATE HOUSE 19th OH

Full Name (Last, First, Middle Initial)

**C. Citizens for Mike Duffey**

Mailing Address 645 Farrington Drive

City Worthington	State OH	Zip Code 43085
---------------------	-------------	-------------------

Purpose of Disbursement  
Mike Duffey, STATE HOUSE 21st OH

Candidate Name

**OH Rep. Mike Duffey**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463979**

Amount of Each Disbursement this Period

2500.00
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Mike Duffey, STATE HOUSE 21st OH

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Buchy**

Mailing Address 2191 Oak Street

City	State	Zip Code
Maria Stein	OH	45860

Purpose of Disbursement  
Jim Buchy, STATE HOUSE 84th OH

Candidate Name

**OH Rep. Jim Buchy**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 84

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463980**

Amount of Each Disbursement this Period

1000.00
---------

Jim Buchy, STATE HOUSE 84th OH

Full Name (Last, First, Middle Initial)

**B. Batchelder for Representative Committee**

Mailing Address 4086 Irvine Oval

City	State	Zip Code
Medina	OH	44256-9069

Purpose of Disbursement  
William Batchelder, STATE HOUSE 69th OH

Candidate Name

**William Batchelder**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 69

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463981**

Amount of Each Disbursement this Period

4000.00
---------

William Batchelder, STATE HOUSE 69th OH

Full Name (Last, First, Middle Initial)

**C. Citizens For Amstutz**

Mailing Address 4456 Wood Lake Trl

City	State	Zip Code
Wooster	OH	44691-8582

Purpose of Disbursement  
Ron Amstutz, STATE HOUSE 3rd OH

Candidate Name

**Ron Amstutz**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463982**

Amount of Each Disbursement this Period

2500.00
---------

Ron Amstutz, STATE HOUSE 3rd OH

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 104

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect John Adams**

Mailing Address 1509 Bon Air Cr

City	State	Zip Code
Sidney	OH	45365

Purpose of Disbursement  
John Adams, STATE HOUSE 85th OH

Candidate Name

**OH Rep. John Adams**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 85

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2013

**Transaction ID : 7463983**

Amount of Each Disbursement this Period

1000.00
---------

John Adams, STATE HOUSE 85th OH

Full Name (Last, First, Middle Initial)

**B. Ohio House Republican Organizational Cmt**

Mailing Address 4679 Winterset Dr

City	State	Zip Code
Columbus	OH	43220-8113

Purpose of Disbursement  
Direct Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2013

**Transaction ID : 7465012**

Amount of Each Disbursement this Period

1500.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Brenner for Ohio**

Mailing Address PO Box 100

City	State	Zip Code
Powell	OH	43065

Purpose of Disbursement  
Andrew Brenner, STATE HOUSE 67th OH

Candidate Name

**OH Rep. Andrew Brenner**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 67

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : 7494442**

Amount of Each Disbursement this Period

500.00
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Andrew Brenner, STATE HOUSE 67th OH

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Husted for Ohio**

Mailing Address 211 S Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Jon Husted, SECRETARY OF STATE OH

Candidate Name

**Jon Husted**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : 7494443**

Amount of Each Disbursement this Period

2500.00
---------

Jon Husted, SECRETARY OF STATE OH

Full Name (Last, First, Middle Initial)

**B. Alabamians for Luther Strange, Inc.**

Mailing Address PO Box 3196

City	State	Zip Code
Montgomery	AL	36109

Purpose of Disbursement  
Luther Strange, ATTORNEY GENERAL AL

Candidate Name

**Luther Strange**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : 7494444**

Amount of Each Disbursement this Period

500.00
--------

Luther Strange, ATTORNEY GENERAL AL

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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21000.00
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